

UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF NEW YORK

RECEIVED
SDNY PRO SE OFFICE

2016 NOV 28 PM 4:52

S.D. OF N.Y.

THIERNO S. DIALLO

(In the space above enter the full name(s) of the plaintiff(s).)

-against-

**COMPLAINT
FOR EMPLOYMENT
DISCRIMINATION**

Jury Trial: ☒ Yes ☐ No
(check one)

WHOLE FOODS MARKET GROUP, INC.

(In the space above enter the full name(s) of the defendant(s).
If you cannot fit the names of all of the defendants in the space
provided, please write "see attached" in the space above and
attach an additional sheet of paper with the full list of names.
Typically, the company or organization named in your charge
to the Equal Employment Opportunity Commission should be
named as a defendant. Addresses should not be included here.)

16CV9228

This action is brought for discrimination in employment pursuant to: (check only those that apply)

☒

Title VII of the Civil Rights Act of 1964, as codified, 42 U.S.C. §§ 2000e to 2000e-17 (race, color, gender, religion, national origin).

NOTE: In order to bring suit in federal district court under Title VII, you must first obtain a Notice of Right to Sue Letter from the Equal Employment Opportunity Commission.

☐

Age Discrimination in Employment Act of 1967, as codified, 29 U.S.C. §§ 621 - 634.

NOTE: In order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file a charge with the Equal Employment Opportunity Commission.

☐

Americans with Disabilities Act of 1990, as codified, 42 U.S.C. §§ 12112 - 12117.

NOTE: In order to bring suit in federal district court under the Americans with Disabilities Act, you must first obtain a Notice of Right to Sue Letter from the Equal Employment Opportunity Commission.

☒

New York State Human Rights Law, N.Y. Exec. Law §§ 290 to 297 (age, race, creed, color, national origin, sexual orientation, military status, sex, disability, predisposing genetic characteristics, marital status).

☒

New York City Human Rights Law, N.Y. City Admin. Code §§ 8-101 to 131 (actual or perceived age, race, creed, color, national origin, gender, disability, marital status, partnership status, sexual orientation, alienage, citizenship status).

I. Parties in this complaint:

- A. List your name, address and telephone number. Do the same for any additional plaintiffs named. Attach additional sheets of paper as necessary.

Plaintiff Name THIERNO S. DIALLO
Street Address 1640 GRAND AVE. 1A
County, City BRONX,
State & Zip Code NEW YORK, 10453
Telephone Number 646-251-8334

- B. List all defendants' names and the address where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption. Attach additional sheets of paper as necessary.

Defendant Name WHOLE FOOD MARKET GROUP, INC.
Street Address 550 BOWIE STREET
County, City AUSTIN
State & Zip Code TEXAS, 78703-4644
Telephone Number _____

- C. The address at which I sought employment or was employed by the defendant(s) is:

Employer WHOLE FOOD MARKET - MTE
Street Address 226 E 57th ST
County, City NEW YORK
State & Zip Code NEW YORK 10022
Telephone Number 646-497-1222

II. Statement of Claim:

State as briefly as possible the facts of your case, including relevant dates and events. Describe how you were discriminated against. If you are pursuing claims under other federal or state statutes, you should include facts to support those claims. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach additional sheets of paper as necessary.

- A. The discriminatory conduct of which I complain in this action includes: *(check only those that apply)*

☐ Failure to hire me.
☒ Termination of my employment.
☒ Failure to promote me.
☐ Failure to accommodate my disability.
☐ Unequal terms and conditions of my employment.

✓

Retaliation.

Other acts (specify): _____

Note: Only those grounds raised in the charge filed with the Equal Employment Opportunity Commission can be considered by the federal district court under the federal employment discrimination statutes.

B. It is my best recollection that the alleged discriminatory acts occurred on: 12-02-2015.
Date(s)

C. I believe that defendant(s) (check one):

_____ is still committing these acts against me.

✓ _____ is not still committing these acts against me.

D. Defendant(s) discriminated against me based on my (check only those that apply and explain):

☐ race _____ ☐ color _____

☐ gender/sex _____ ☐ religion _____

☒ national origin GUINEAN

☐ age. My date of birth is _____ (Give your date of birth only if you are asserting a claim of age discrimination.)

☐ disability or perceived disability, _____ (specify)

E. The facts of my case are as follow (attach additional sheets as necessary):

On December 2nd 2015 I lost my job at Whole Foods Market after three years and three months of hard work and professionalism, as a result of continuous acts of discrimination, harassment, intimidation and retaliation.

On that day of December I came to work my shift in the afternoon and less than an hour later I was called to the store team leadership office by my Team leader. I the office was present...

Note: As additional support for the facts of your claim, you may attach to this complaint a copy of your charge filed with the Equal Employment Opportunity Commission, the New York State Division of Human Rights or the New York City Commission on Human Rights.

III. Exhaustion of Federal Administrative Remedies:

A. It is my best recollection that I filed a charge with the Equal Employment Opportunity Commission or my Equal Employment Opportunity counselor regarding defendant's alleged discriminatory conduct on: DECEMBER 14, 2015 (Date).

E (Continued)

(Continued) the store team leader, my team leader and myself. I was informed of a report with allegations that I stayed beyond my lunch break made by my Assistant Team Leader (ATL). I explained to that I spent the time in the WFM-U office working on resume and my professional development, then I used the restroom and prayed but that did not saved me from being terminated even though I have been one of the hardest worker all the times.

Going back few days ago -less than a week- my teammate received a "writing warning" for a similar situation as mine, precisely for not returning to the sales floor for around 30 mins. That co-worker was given that sanction even though was not on break and was not able to give a reason to explain the fact of not being seen for that long. To my difference, I received the ultimate penalty despite the fact that I was on my break as entitled.

Before that day, I have been trying to improve my situation in my workplace for a while, as I am supposed to, to benefit opportunities that are available for all team members, including but not limited to career development, equal opportunity, fair and equal treatment in the workplace, etc. That day I was in the WFM-U working on finding a position in another store and try to transfer there as I was not anymore happy in the store because my team leadership was not giving my chance to be successful as I was working hard to reach my goals.

I worked harder every day since my first day of work and it took me not less than two years to be offered a Full-time position and benefits that goes with it such as medical and others. Which I found unfair when I was seeing new hired being offered Full-time positions and benefits right after being hired, even when they did not have any experience in the department. Among others benefits and opportunities, my former employer offers employees the opportunity to transfer within the store or the company after you are voted as a Team member; to be upgraded to PT20 and get some benefits if you are working more than 20 hours a week; a raises of wage twice the first year and once every year from the second year; to pick shifts in other department as they are available to allow team member to get extra-hour and experience in different department.

In my case, even though I have tried until my last days of employment to get those benefit and opportunities, it turned unsuccessfully and when I succeeded, I had to seek them incessantly even when I was entitled because my team leadership was able either to delay it or just prevent me from getting it. In respect to the transfer, until my last days I have tried but I was never successful in doing it even when another team leader offered me a position and me meeting the requirements because my team leadership used to tell me: "... you are a hard worker, I need you and prefer to keep you...". Which make sense but my same leadership was not allowing me to benefits from being a hard worker. For a year, I have worked overnight shifts during which period I got scheduled to work only one shift in a week while others were

B. The Equal Employment Opportunity Commission (check one):

 has not issued a Notice of Right to Sue letter.
✓ issued a Notice of Right to Sue letter, which I received on SEP. 29, 2016 (Date).

Note: Attach a copy of the Notice of Right to Sue letter from the Equal Employment Opportunity Commission to this complaint.

C. Only litigants alleging age discrimination must answer this Question.

Since filing my charge of age discrimination with the Equal Employment Opportunity Commission regarding defendant's alleged discriminatory conduct (check one):

 60 days or more have elapsed.
 less than 60 days have elapsed.

IV. Relief:

WHEREFORE, plaintiff prays that the Court grant such relief as may be appropriate, including injunctive orders, damages, and costs, as follows: _____

(Describe relief sought, including amount of damages, if any, and the basis for such relief.)

I declare under penalty of perjury that the foregoing is true and correct.

Signed this 28 day of NOVEMBER, 2016.

Signature of Plaintiff

Address

1640 GRAND AVE

APT. 1A

BRONX, NY 10453

Telephone Number

646-251-8334

Fax Number (if you have one) _____

U.S. EQUAL EMPLOYMENT OPPORTUNITY COMMISSION

DISMISSAL AND NOTICE OF RIGHTS

To: **Thierno S. Diallo**
125 W. 137th Street, Apt 1B
New York, NY 10030

From: **New York District Office**
33 Whitehall Street
5th Floor
New York, NY 10004



On behalf of person(s) aggrieved whose identity is
CONFIDENTIAL (29 CFR §1601.7(a))

EEOC Charge No.

EEOC Representative

Telephone No.

16G-2016-00846

Holly M. Woodyard,
State & Local Program Manager

(212) 336-3643**THE EEOC IS CLOSING ITS FILE ON THIS CHARGE FOR THE FOLLOWING REASON:**

The facts alleged in the charge fail to state a claim under any of the statutes enforced by the EEOC.



Your allegations did not involve a disability as defined by the Americans With Disabilities Act.



The Respondent employs less than the required number of employees or is not otherwise covered by the statutes.



Your charge was not timely filed with EEOC; in other words, you waited too long after the date(s) of the alleged discrimination to file your charge



The EEOC issues the following determination: Based upon its investigation, the EEOC is unable to conclude that the information obtained establishes violations of the statutes. This does not certify that the respondent is in compliance with the statutes. No finding is made as to any other issues that might be construed as having been raised by this charge.



The EEOC has adopted the findings of the state or local fair employment practices agency that investigated this charge.



Other (briefly state)

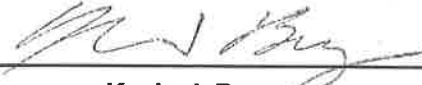
- NOTICE OF SUIT RIGHTS -

(See the additional information attached to this form.)

Title VII, the Americans with Disabilities Act, the Genetic Information Nondiscrimination Act, or the Age Discrimination in Employment Act: This will be the only notice of dismissal and of your right to sue that we will send you. You may file a lawsuit against the respondent(s) under federal law based on this charge in federal or state court. Your lawsuit **must be filed WITHIN 90 DAYS of your receipt of this notice**; or your right to sue based on this charge will be lost. (The time limit for filing suit based on a claim under state law may be different.)

Equal Pay Act (EPA): EPA suits must be filed in federal or state court within 2 years (3 years for willful violations) of the alleged EPA underpayment. This means that **backpay due for any violations that occurred more than 2 years (3 years) before you file suit may not be collectible.**

On behalf of the Commission



Kevin J. Berry,
District Director

SEP 29 2016

(Date Mailed)

Enclosures(s)

cc:

Attn: Director of Human Resources
WHOLE FOODS MARKET GROUP, INC.
550 Bowie Street
Austin, TX 78703



Division of Human Rights

ANDREW M. CUOMO
Governor

HELEN DIANE FOSTER
Commissioner

December 14, 2015

Thierno S. Diallo
125 W. 137th Street, Apt 1B
New York, NY 10030

Re: Thierno S. Diallo v. Whole Foods Market Group, Inc.
Case No. 10178928

Dear Thierno S. Diallo:

Please be advised that this office has received your complaint. Your filing date is 12/14/2015.

A copy of your complaint, and the determination, will be sent to the U.S. Equal Employment Opportunity Commission (EEOC), so that your complaint may be dual-filed under applicable federal law. Your EEOC charge number is 16GB600846.

To protect your rights, it is essential that the Division be notified promptly of any change in your address or telephone number. A form is enclosed for this purpose.

You will be contacted by the Human Rights Specialist assigned to your case when the active investigation of your complaint begins. In the meantime, if you have any questions please call our office at (212) 961-8650.

Very truly yours,

David E. Powell
Regional Director

NEW YORK STATE
DIVISION OF HUMAN RIGHTS

NEW YORK STATE DIVISION OF
HUMAN RIGHTS on the Complaint of

THIERNO S. DIALLO,

Complainant,

v.

WHOLE FOODS MARKET GROUP, INC.,

Respondent.

VERIFIED COMPLAINT
Pursuant to Executive Law,
Article 15

Case No.
10178928

Federal Charge No. 16GB600846

I, Thierno S. Diallo, residing at 125 W. 137th Street, Apt 1B, New York, NY, 10030, charge the above named respondent, whose address is 550 Bowie Street, Austin, TX, 78703-4644 with an unlawful discriminatory practice relating to employment in violation of Article 15 of the Executive Law of the State of New York (Human Rights Law) because of national origin, opposed discrimination/retaliation.

Date most recent or continuing discrimination took place is 12/2/2015.

The allegations are:

1. I am of African descent and I opposed discrimination. Because of this, I have been subject to unlawful discriminatory actions.

SEE ATTACHED DESCRIPTION OF DISCRIMINATION

Based on the foregoing, I charge respondent with an unlawful discriminatory practice relating to employment because of national origin, opposed discrimination/retaliation, in violation of the New York State Human Rights Law (Executive Law, Article 15), Section 296.

I also charge the above-named respondent with violating Title VII of the Civil Rights Act of 1964, as amended (covers race, color, creed, national origin, sex relating to employment). I hereby authorize SDHR to accept this verified complaint on behalf of the U.S. Equal Employment Opportunity Commission (EEOC) subject to the statutory limitations contained in the aforementioned law(s).

DESCRIPTION OF DISCRIMINATION - for all complaints (Public Accommodation, Employment, Education, Housing, and all other regulated areas listed on Page 3)

Please tell us more about each act of discrimination that you experienced. Please include dates, names of people involved, and explain why you think it was discriminatory. PLEASE TYPE OR PRINT CLEARLY.

ON DECEMBER 2nd 2015, I WAS TERMINATED FROM MY JOB AS A RESULT OF A RETALIATION / DISCRIMINATION IN THE HANDLING OF MY CASE.

ON THAT DAY, I CAME TO WORK MY SHIFT AND LESS THAN AN HOUR LATER, I WAS CALLED TO THE STORE LEADERSHIP - AS I AM WORKING IN A STORE/SUPERMARKET - BY MY TEAM LEADER. IN THE OFFICE OF THE STORE LEADERSHIP, IN PRESENCE OF MY TEAM LEADER I WAS INFORMED OF A REPORT THAT ALLEGED AN OVERSTAYING MY LUNCH BREAK, AND THAT WILL BE THE REASON OF MY TERMINATION. THE^X WAS MADE/SENT BY MY ASSISTANT TEAM LEADER, I GOT INFORMED. GOING BACK FEW DAYS BEFORE MY SITUATION, MAYBE LESS THAN A WEEK AGO, A COWORKER GOT "A WRITE-UP" FOR NOT BEING SEEN ON THE SALES FLOOR, AROUND MORE THAN 30 MINS - BY OUR TEAM LEADERSHIP. THAT COWORKER WAS GIVEN THAT SANCTION EVEN THOUGH HE WAS NOT ON A "BREAK" BUT SOMEWHERE DOING HIS OWN STUFF, AND UNABLE TO JUSTIFY HIMSELF WHILE ME, I CLEARLY EXPLAINED THAT I OVERSTAYED MY BREAK TO: PRAY AND I DID ALSO FINISHED UP WORK I STARTED WHILE ON BREAK AND WAS NOT ABLE TO FINISH IN THE SPECIFIED TIME OF THAT BREAK. THAT WAS RELATED TO MY SITUATION IN THE STORE (WORKPLACE), AS I AM FEELING VERY UNHAPPY WITH THE WAY MY TEAM LEADERSHIP WAS TREATING ME UNFAIRLY SO I WAS WORKING ON GETTING A POSITION IN OTHER STORES, AND TRANSFER. I HAD BEEN WORKING ON THAT FOR VERY LONG TIME, UNSUCCESSFULLY UNTIL I FINALLY LOST MY JOB, AND I FEEL

If you need more space to write, please continue writing on a separate sheet of paper and attach it to the complaint form. **PLEASE DO NOT WRITE ON THE BACK OF THIS FORM.**

①

DESCRIPTION OF DISCRIMINATION - for all complaints (Public Accommodation, Employment, Education, Housing, and all other regulated areas listed on Page 3)

Please tell us more about each act of discrimination that you experienced. Please include dates, names of people involved, and explain why you think it was discriminatory. **PLEASE TYPE OR PRINT CLEARLY.**

THAT MY LEADERSHIP HAS PLAYED A ROLE IN MAKING IT UNSUCCESSFUL, WHICH IS UNFAIR AS THE COMPANY OFFER THAT OPPORTUNITY TO ITS TEAM MEMBERS, AFTER 6 MONTHS OF EMPLOYMENT. IN MY CASE, I HAVE BEEN WORKING FOR THE COMPANY FOR MORE THAN 3 YEARS. I WAS EVEN NOT ALLOWED TO PICK A SHIFT IN OTHER DEPARTMENT WITHIN MY STORE WHILE DURING THOSE YEARS, I HAVE SEEN OTHER CO-WORKER BEING ALLOWED TO TAKE ADVANTAGE OF THOSE OPPORTUNITY. I WAS ALWAYS GIVING THE JUSTIFICATION THAT "I AM A HARDWORKER SO MY TEAM NEEDS ME", PER MY LEADERSHIP; WHICH ^{STATEMENT} I FEEL COULD HAVE BEEN A REASON WHY I COULD BENEFIT FROM THOSE OPPORTUNITY.

I ALSO FEEL THAT I LOST MY JOB BECAUSE MY TEAM LEADER HANDLED MY CASE DIFFERENTLY AS A RETALIATION AS I STATED IT EARLIER THAT MY COWORKER GOT WRITTEN UP BUT ME, I GOT TERMINATED FOR MORE OR LESS THE SAME SITUATION. TO EXPLAIN THE ROOT OF IT, I WILL GO BACK IN TIME IN LATE 2013 AND DURING 2014.

ON THE MONTH OF DEC. 2013, AFTER SEVERAL ATTEMPTS TO IMPROVE MY SITUATION AT WORK AS I WAS CONCERNED ON THE FACT THAT I WAS FOR SOME REASONS NOT GETTING ANY BENEFITS AND THAT I COULD NOT GET TO BE FULL TIME AFTER A YEAR OR SO WHILE OTHER PEOPLE ARE BEING OFFERED FULL TIME RIGHT AFTER THEY ARE AND HIRED. ADDED TO THAT THEY GET ALSO BENEFITS AS DOES SOME OTHER PART TIMERS LIKE ME, SUCH AS THEY REACH 400 HOURS OF WORK. SO, I STARTED ASKING

If you need more space to write, please continue writing on a separate sheet of paper and attach it to the complaint form. **PLEASE DO NOT WRITE ON THE BACK OF THIS FORM.**

(2)

DESCRIPTION OF DISCRIMINATION - for all complaints (Public Accommodation, Employment, Education, Housing, and all other regulated areas listed on Page 3)

Please tell us more about each act of discrimination that you experienced. Please include dates, names of people involved, and explain why you think it was discriminatory. **PLEASE TYPE OR PRINT CLEARLY.**

QUESTIONS ON HOW TO WORK THAT SITUATION UNTIL I FINALLY DECIDED TO SEND AN EMAIL FOR INFORMATIONS TO THE SERVICE IN CHARGE OF PAYROLL AND BENEFITS. I ALSO BROUGHT MY CONCERNS TO THE STORE LEADERSHIP, WHICH IS NOT THE SAME AS NOW. IN THOSE FOLLOWING MONTHS, THING STARTED TO MOVE AND MY TEAM LEADER NOW GOT PROMOTED FROM SUPERVISOR TO ASSISTANT TEAM LEADER, ONE STEP BELOW HIS POSITION OF TEAM LEADER, NOW, IN HIS POSITION OF ASSISTANT TEAM LEADER, HE ALSO HANDLE SCHEDULLING AND OTHER DUTIES. WHILE I WAS STRUGGLING TO GET A FULL TIME POSITION AND BENEFITS, MANY EMAILS OR CORRESPONDANCE WAS SENT TO HIM AND THE TEAM LEADER, WHICH THEY RESPONDED IN ACTION AGAINST ME. ONE DAY, HE CALLED ME AND ATTEMPTED TO CUT MY PAYRATE AND I REFUSED TO SIGN THE PAPER, HE TOLD ME THAT: « HE WILL CUT MY PAYRATE, EVEN IF REFUSE TO SIGN THE PAPER ». RIGHT AFTER, I CALLED THE SERVICE IN CHARGE OF HANDLING THOSE KIND OF CONFLICTS FOR MY COMPANY TO EXPLAIN/COMPLAIN ABOUT THE INCIDENT. AND SINCE THAT, HIS GOAL IS TO FIND ANY REASON TO GET ME TERMINATED AND WHEN HE BECAME MY TEAM LEADER, HE JUST GOT EXTRA POWER TO DO IT, AND MY TERMINATION ON DEC. 2, 2015 IS THE RESULT.

If you need more space to write, please continue writing on a separate sheet of paper and attach it to the complaint form. **PLEASE DO NOT WRITE ON THE BACK OF THIS FORM.**

(3)

NOTARIZATION OF THE COMPLAINT

Based on the information contained in this form, I charge the above-named Respondent with an unlawful discriminatory practice, in violation of the New York State Human Rights Law.

By filing this complaint, I understand that I am also filing my employment complaint with the United States Equal Employment Opportunity Commission under the Americans With Disabilities Act (covers disability related to employment), Title VII of the Civil Rights Act of 1964, as amended (covers race, color, religion, national origin, sex relating to employment), and/or the Age Discrimination in Employment Act, as amended (covers ages 40 years of age or older in employment), or filing my housing/credit complaint with HUD under Title VIII of the Federal Fair Housing Act, as amended (covers acts of discrimination in housing), as applicable. This complaint will protect your rights under Federal Law.

I hereby authorize the New York State Division of Human Rights to accept this complaint on behalf of the U.S. Equal Employment Opportunity Commission, subject to the statutory limitations contained in the aforementioned law and/or to accept this complaint on behalf of the U.S. Department of Housing and Urban Development for review and additional filing by them, subject to the statutory limitations contained in the aforementioned law.

I have not filed any other civil action, nor do I have an action pending before any administrative agency, under any state or local law, based upon this same unlawful discriminatory practice.

I swear under penalty of perjury that I am the complainant herein; that I have read (or have had read to me) the foregoing complaint and know the contents of this complaint; and that the foregoing is true and correct, based on my current knowledge, information, and belief.

THIERNO S. DIALLO
Sign your full legal name

GLENN NICHTENHAUSER
Notary Public, State of New York
Qualified in Queens County
No. 01NI4983666
Commission Expires July 1, 2019

Subscribed and sworn before me
This 7th day of December 2015

[Signature]
Signature of Notary Public

County: Queens

Commission expires: 7/1/2019

Please note: Once this form is notarized and returned to the Division, it becomes a legal document and an official complaint with the Division of Human rights. After the Division accepts your complaint, this form will be sent to the company or person(s) whom you are accusing of discrimination.



New York State Division of Human Rights Complaint Form

RECEIVED

DF-100 2015

NEW YORK STATE DIVISION OF HUMAN RIGHTS
REGIONAL OFFICE

CONTACT INFORMATION

My contact information:

Name: THEODORE S. DIALLO
Address: 125 W 137th ST Apt or Floor #: 1B
City: NEW YORK State: NY Zip: 10030

REGULATED AREAS

I believe I was discriminated against in the area of:

- | | | |
|--|--|--|
| <input checked="" type="checkbox"/> Employment | <input type="checkbox"/> Education | <input type="checkbox"/> Volunteer firefighting |
| <input type="checkbox"/> Apprenticeship Training | <input type="checkbox"/> Boycotting/Blacklisting | <input type="checkbox"/> Credit |
| <input type="checkbox"/> Public Accommodations (Restaurants, stores, hotels, movie theaters amusement parks, etc.) | <input type="checkbox"/> Housing | <input type="checkbox"/> Labor Union, Employment Agencies |
| <input type="checkbox"/> Commercial Space | <input type="checkbox"/> Internship | |

I am filing a complaint against:

Company or Other Name: WHOLE FOOD MARKET
Address: 226 E 57th ST
City: NY State: NY Zip: 10022
Telephone Number: 646 497 1221
(area code)

Individual people who discriminated against me:

Name: NATHAN NACHIN
Title: TEAM LEADER

Name: SUGERY NOVAS
Title: ASS. TEAM LEADER

DATE OF DISCRIMINATION

The most recent act of discrimination happened on:

12 02 2015
month day year

BASIS OF DISCRIMINATION

Please tell us why you were discriminated against by checking one or more of the boxes below.



You do not need to provide information for every type of discrimination on this list. Before you check a box, make sure you are checking it only if you believe it was a reason for the discrimination. Please look at the list on Page 1 for an explanation of each type of discrimination.

Please note: Some types of discrimination on this list do not apply to all of the regulated areas listed on Page 3. (For example, Conviction Record applies only to Employment and Credit complaints, and Familial Status is a basis only in Housing and Credit complaints). These exceptions are listed next to the types of discrimination below.

I believe I was discriminated against because of my:

| | |
|---|--|
| <input type="checkbox"/> Age (Does not apply to Public Accommodations) Date of Birth: | <input type="checkbox"/> Genetic Predisposition (Employment only) Please specify: |
| <input type="checkbox"/> Arrest Record (Only for Employment, Licensing, and Credit) Please specify: | <input type="checkbox"/> Marital Status Please specify: |
| <input type="checkbox"/> Conviction Record (Employment and Credit only) Please specify: | <input type="checkbox"/> Military Status: Please specify: |
| <input type="checkbox"/> Creed / Religion Please specify: | <input checked="" type="checkbox"/> National Origin Please specify: AFRICAN |
| <input type="checkbox"/> Disability Please specify: | <input type="checkbox"/> Race/Color or Ethnicity Please specify: |
| <input type="checkbox"/> Domestic Violence Victim Status: (Employment only) Please specify: | <input type="checkbox"/> Sex Please specify: <input type="checkbox"/> Female <input type="checkbox"/> Male <input type="checkbox"/> Pregnancy <input type="checkbox"/> Sexual Harassment |
| <input type="checkbox"/> Familial Status (Housing and Credit only) Please specify: | <input type="checkbox"/> Sexual Orientation Please specify: |
| <input checked="" type="checkbox"/> Retaliation (If you filed a discrimination case before, or helped someone else with a discrimination case, or reported discrimination due to race, sex, or any other category listed above) Please specify: | |



Before you turn to the next page, please check this list to make sure that you provided information **only** for the type of discrimination that relates to your complaint.

EMPLOYMENT OR INTERNSHIP DISCRIMINATION

Please answer the questions on this page only if you were discriminated against in the area of employment or internship. If not, turn to the next page.

How many employees does this company have?

- a) 1-3 b) 4-14 c) 15 or more d) 20 or more e) Don't know

Are you currently working for the company?

☐ Yes

Date of hire: ()
Month day year

What is your job title? _____

☒ No

Last day of work: (12 02 2015)
Month day year

What was your job title? Team Member

☐ I was not hired by the company

Date of application: ()
Month day year

ACTS OF DISCRIMINATION

What did the person/company you are complaining against do? Please check all that apply.

- ☐ Refused to hire me
- ☒ Fired me / laid me off
- ☐ Did not call me back after a lay-off
- ☐ Demoted me
- ☐ Suspended me
- ☐ Sexually harassed me
- ☒ Harassed or intimidated me (other than sexual harassment)
- ☐ Denied me training
- ☐ Denied me a promotion or pay raise
- ☒ Denied me leave time or other benefits
- ☐ Paid me a lower salary than other workers in my same title
- ☐ Gave me different or worse job duties than other workers in my same title
- ☐ Denied me an accommodation for my disability
- ☐ Denied me an accommodation for my religious practices
- ☐ Gave me a disciplinary notice or negative performance evaluation
- ☐ Other: _____